

Foster Family Home - Corrective Action Report

Provider ID: 1-569931

Home Name: Marcelina Tito, CNA

91-851 Kapana Place

Ewa Beach

HI 96706

Review ID: 1-569931-6

Reviewer: Jackie Chamberlain

Begin Date: 6/12/2020

Foster Family Home

Required Certificate

[11-800-6]

6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

6(d)(1) Home inspection made for a 3 bed annual inspection. Home met all compliance requirements at the time of the home inspection. No corrective action required

Jackie Chamberlain *fw*
Compliance Manager

[Signature]
Primary Care Giver

6/12/2020
Date

6/12/2020
Date